

# **Visitation Evaluation for SAE**

Student Name \_\_\_\_\_

Date \_\_\_\_\_

Time of supervision \_\_\_\_\_

Type of SAE \_\_\_\_\_

## **1. Quality of SAE**

- A. Are the facilities needed for the SAE in order?
- B. Is responsibility being exhibited in the SAE? (Care of animals, equipment, etc.)
- C. Is the record book being kept up to date?
- D. Are improvement practices being used with the SAE?
- E. Are SAE skills/proficiencies noticeable?

## **2. Recommendations for SAE Improvement**

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_

## **3. Overall evaluation of SAE (grade)**

Circle one: A    B    C    D    F

## **4. Other Comments:**

Instructor signature: \_\_\_\_\_ Date \_\_\_\_\_